



ANZSN Renal Unit COVID-19 Dialysis Preparedness Checklist

The checklist has been adapted for Australian and Aotearoa New Zealand renal units from the Centres for Disease Control and Prevention's (CDC) *Coronavirus Disease 2019 (COVID-19) Outpatient Dialysis Facility Preparedness Assessment Tool*.¹

This checklist is for use by renal unit senior management teams in Australia and New Zealand to assist them in considering key components of COVID-19 contingency planning for their units.

The checklist is for general information only and is not a list of mandatory requirements. It is recognised that each unit will have specific circumstances and challenges that will require local solutions. The topics in this checklist are intended to cover major themes that should be considered.

Please refer to the important notice at the end of the checklist.

Status	Completed	In Progress	Not Started	Not Applicable
Infection prevention and control policies and training for healthcare workers (HCW)				
The Renal Unit leadership team has read and acted on National, State and Local Health System advice on COVID-19				
Unit provides education and job-specific training to HCWs regarding COVID-19 including:				
Signs and symptoms of COVID-19 infection.				
Importance of hand hygiene, respiratory hygiene, and cough etiquette.				
CPR in COVID-19 positive patients				
Triage procedures and patient placement.				
HCW sick leave policies.				
Self-monitoring for fever or respiratory symptoms including not reporting to work when ill.				
How and to whom suspected and confirmed COVID-19 cases should be reported.				
Schedule non-essential patient visits virtually (eg clinic reviews)				
Ensure adequate dialysis supplies in stock and on order (including for home patients)				
Education and Culturally Appropriate Communication with Patients				
Unit provides education to patients about the following:				
COVID-19 (e.g., symptoms, how it is transmitted).				
Importance of immediately informing HCW if they feel feverish or ill including communication before attending dialysis.				
The importance of continuing to attend for dialysis as scheduled.				

¹ CDC *Coronavirus Disease 2019 (COVID-19) Outpatient Dialysis Facility Preparedness Assessment Tool* at <https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID-19-outpatient-dialysis.pdf>

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Actions they can take to protect themselves and their fellow dialysis patients (e.g., hand hygiene, covering their cough, maintaining social distancing).				
Actions the Unit is taking to keep them safe (e.g. visitor restrictions, changes in PPE).				
Patients have up to date contact details, enduring power of attorney, anticipatory care plans and acute resuscitation plan.				
Patients receive advice to minimize risks if dialysis duration or frequency has to be reduced due to staffing shortages.				
For home based and transplant patients' communication on alternative follow up strategies being deployed (including telehealth) and contact numbers for specialist nursing staff and when to contact them.				
Where to get trusted information on COVID-19 and specific issues related to kidney disease				
Communication messages and strategies for Indigenous populations should be developed in partnership with the Indigenous community.				
Process for rapidly identifying and isolating patients with confirmed or suspected COVID-19				
Unit has notified patients to call ahead and report fever or symptoms of respiratory infection.				
Unit has a system to receive and triage phone calls from patients with symptoms of fever or respiratory infection.				
Unit has a system to screen patients at presentation to the Unit for fever, respiratory symptoms and contact with known cases.				
HCWs screening patients wear PPE including surgical mask, eye protection, gloves and fluid resistant apron or gown.				
Signs are posted in triage areas advising patients with fever or symptoms of respiratory infection to immediately notify triage personnel so appropriate precautions can be put in place.				
Facemasks are provided to symptomatic patients (fever or respiratory symptoms) upon entry to the Unit and kept on until they leave the Unit.				
Alcohol based hand sanitizer for hand hygiene is available at each entrance, in waiting areas and near treatment stations.				
Unit provides tissues and no-touch receptacles for disposal of tissues in dialysis treatment areas.				
Unit has a process to ensure patients with confirmed or suspected COVID-19 are placed in the designated COVID-19 triage or treatment area.				
Unit has a process in place for immediate notification of Unit leadership when a suspect case is identified.				
Unit has a process to notify Medical Officer of Health (NZ) or relevant Australian authorities of suspected and confirmed COVID-19 cases.				
Patient placement and testing				

Status	Completed	In Progress	Not Started	Not Applicable
Unit considers methods to minimize contact between dialysis patients from different shifts.				
Units limit as far as practicable use of waiting rooms with patients being taken directly into dialysis units.				
Confirm the number and location of available isolation rooms in the Unit.				
The Unit identifies a specific isolation room for the testing of patients for COVID-19.				
HCWs have the correct PPE for testing for COVID-19.				
Unit maintains at least 1.5 metres (Australia) or 2 metres (New Zealand) of separation between all patients.				
Unit has a plan for cohorting patients and HCWs if they are dialysing multiple patients with confirmed COVID-19.				
Unit has plans to minimize the number of HCWs who enter the isolation dialysis room (or isolation station) (e.g., having dedicated HCW to care for patients with suspected or confirmed COVID-19).				
Transmission-Based Precautions				
Unit has a procedure for assessing supply (inventory) of personal protective equipment (PPE) and other infection prevention and control supplies (e.g., hand hygiene supplies).				
Unit has a contingency plan to optimize PPE if shortages occur.				
HCWs wear the following PPE when caring for patients with undiagnosed respiratory illness and COVID-19 confirmed and suspected cases. <ul style="list-style-type: none"> • Gloves • Fluid resistant apron • Surgical Facemask • Eye protection (e.g., goggles or face shield) 				
HCWs receive appropriate training, including “just in time” training on selection and proper use of (including putting on and removing) PPE, with a required demonstration of competency.				
Unit has a process for auditing HCW adherence to recommended PPE use.				
Movement of patients with undiagnosed respiratory infection and/or confirmed or suspected COVID-19 within the dialysis Unit				
Patient movement outside of the isolation room (isolation station) will be limited to essential purposes.				
The Unit has a plan for wearing of PPE by patients e.g. face mask				
Hand hygiene (HH)				
HH supplies including alcohol-based hand sanitizer are readily accessible inpatient care areas, including areas where HCW put on and remove PPE.				
Unit has a process for auditing HCW adherence to recommended hand hygiene practices.				
Environmental Cleaning				

Status	Completed	In Progress	Not Started	Not Applicable
Unit has a plan to ensure proper cleaning and disinfection of environmental surfaces and equipment.				
All HCW with cleaning responsibilities understand the instructions for use and contact time for selected products.				
Unit has a process to ensure shared or non-dedicated equipment is cleaned and disinfected after use and according to manufacturer's recommendations.				
Unit utilises hospital grade disinfectant which has been verified as being suitable by the Unit or Hospital infection control team.				
Monitoring and managing HCW				
Unit has sick leave policies that are non-punitive, flexible and allow ill health care workers to stay home.				
Unit has a process to conduct active-and/or self-monitoring of HCWs if required by public health.				
Unit has a process to conduct symptom and temperature checks of HCWs prior to the start of the shift (depending on local policies).				
Unit has considered cohort staffing to minimize the risk of transmission between HCWs				
Unit has considered how to redeploy specialist nurses to maximize number of staff able to perform haemodialysis and has retrained staff as appropriate.				
Visitor access and movement within the dialysis Unit				
Unit has a plan to restrict non-essential visitors.				
Visitors are screened for symptoms of acute respiratory infection before entering the Unit.				
A register of all visitors (including staff from other departments) is taken to assist with contact tracing if required.				
Unit Management Structure and situational awareness				
Unit regularly monitors the situation utilizing state and national sources.				
Unit confirms succession planning for senior management roles.				
Smaller units should identify support networks with regional / state partners				
Unit regularly checks state/ national government sources for updated advice on case definitions, testing regimen and infection control advice.				
Unit has a regular scheduled senior management team meeting specific to COVID-19 planning, situational awareness and staffing issues.				
Unit knows where COVID-19 testing is being performed locally and has a plan to refer patients who need COVID-19 testing if not available at the unit.				
Unit notifies ANZDATA of confirmed cases.				

Status	Completed	In Progress	Not Started	Not Applicable
In Patient care and AKI preparedness				
Unit has identified a specific area to accommodate and dialyse patients with ESKD or AKI who are COVID-19 positive and not requiring ICU Care.				
Unit has developed a key contact with ICU to monitor and plan for surge capacity dialysis if required.				
Unit has plans to manage increased demand for haemodialysis, including machines, consumables and specialist nursing and medical staff.				
Transportation				
Unit has explored options for patients to travel individually to dialysis either by private car or by single occupancy taxi.				
If patients must come in group shuttles the Unit has liaised with transport providers to utilize screening questions before boarding transport and have developed an infection control plan in collaboration with the transport provider.				
Unit has a contingency plan in place or has developed with patient's individual contingency plans for transport if unable to travel by their usual form of transport.				
Unit has given guidance to patients on reimbursement of costs related to the use of alternative travel arrangements.				
Unit has a contingency plan if commercial transport providers are unable to continue to provide transport for patients attending for dialysis.				

Abbreviations

CPR - Cardio Pulmonary Resuscitation

HCWs - Healthcare Workers

KHA - Kidney Health Australia

KHNZ - Kidney Health New Zealand

PPE - Personal Protective Equipment

Important Notice

This checklist has been developed by the Australian and New Zealand Society of Nephrology (ANZSN) for the information of Australian and New Zealand renal units to support their COVID-19 contingency planning.

It has had regard to materials developed by the Centers for Disease Control (CDC) (USA) relating to dialysis facility preparedness.²

The original CDC materials are available free-of-charge on the CDC website. The use or publication of this checklist, including any links to the materials on the CDC website, and any information or other content

² CDC *Coronavirus Disease 2019 (COVID-19) Outpatient Dialysis Facility Preparedness Assessment Tool* at <https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID-19-outpatient-dialysis.pdf>

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The COVID-19 pandemic is rapidly evolving, and there is currently limited information about the SARS-CoV-2 virus, or COVID-19 disease etiology or treatment. Application or use of this checklist is to be considered in this context.

The ANZSN has made reasonable efforts to ensure that the information in this checklist is as accurate as possible, however ANZSN does not in any way guarantee or warrant the accuracy, completeness, currency or source of any material in this checklist.

The ANZSN reserves the right to change any information in this checklist at any time.

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